



NEW BUSINESS CLIENT INTAKE FORM

Legal

Entity name _____

Owner name _____

Federal EIN and Tax Return Type _____

Entity Formation State AND Date of Incorporation _____

Address for Entity _____

Purpose and industry of entity _____

Email Account _____

Please check the following:

Prior year returns requested or received _____

Addresses correct on prior year return _____

Are changes to be made to the current return type _____, if yes new type _____

When will changes occur _____

Formation Documents requested or received _____

Type of Accounting software used _____

Type of CRM and / or ERP or EMR software _____*

Compliant with Federal and State regulatory agencies _____ (Yes/No) _____*

Assigned number _____

*Note - Your business acknowledges that for all tax information brought in after June 1, 2020 there will be an additional \$300 fee assessed in preparation services made available to you by BGS ____ (initial)



NEW CLIENT INTAKE FORM

Legal
Client Name _____

Spouse _____

Social Security Number _____

DL# / State/ Issue & Expr. Dates _____

Spouse DL# / State/ Issue & Expr. Dates _____

DOB Client & Spouse _____

Occupation Client & Spouse _____

No. of Dependents _____

Primary State of Residency _____

Current Address for mailing _____

Current Phone and Email _____

Please check the following:

Prior year returns requested or received _____

Addresses correct on prior year return _____

Have received any IRS Communications _____ (Yes / No)

Are changes to be made to the current return _____, if yes new changes _____

When will changes occur _____

Assigned number _____

*Note - You acknowledge that for all tax information brought in after June 1, 2020 there will be an additional \$150 fee assessed in preparation services made available to you by BGS ____ (initial)